

Age adjusted incidence rates of invasive thyroid cancer – Vermont and United States NPCR and SEER, per 100,000, 1999-2012.

Male				Female			
	US Rate	VT Rate	VT Count		US Rate	VT Rate	VT Count
1999-2012	5.5	5.5	246	1999-2012	16.1	16.6	764
1999	3.7	4.9	15	1999	9.8	13.6	44
2000	3.9	2.1	6	2000	10.9	9.4	30
2001	4.0	4.2	13	2001	11.6	8.0	26
2002	4.4	4.4	13	2002	12.4	12.2	40
2003	4.4	5.8	18	2003	13.0	11.5	38
2004	4.7	3.4	11	2004	14.1	17.3	58
2005	5.3	5.6	18	2005	15.2	20.2	68
2006	5.5	6.0	18	2006	16.2	19.5	66
2007	5.9	7.1	24	2007	17.5	19.4	65
2008	6.4	6.3	22	2008	18.9	20.7	66
2009	6.8	7.0	22	2009	19.9	22.3	74
2010	6.8	4.5	16	2010	20.1	16.7	56
2011	6.9	5.9	21	2011	20.7	20.3	66
2012	7.1	8.7	29	2012	21.3	21.7	67

- The thyroid cancer incidence rates among Vermont males and females are not statistically different from the U.S.
- From 1999 to 2012, the increase in the incidence of male thyroid cancer was statistically significant for the U.S. and Vermont.
- From 1999 to 2012, the increase in the incidence of female thyroid cancer was statistically significant for the U.S. and Vermont.

## **Technical Notes:**

Age Adjustment and Incidence: All rates are age adjusted to the 2000 U.S. standard population. Incidence data were coded using the International Classification of Disease (ICD) for Oncology (ICD-O) coding system. Vermont cases include Vermont residents only. The Vermont and U.S. incidence rates are based on the Vermont Cancer Registry, Vermont Department of Health (1994-2012) and the National Program of Cancer Registries (NPCR) and the Surveillance, Epidemiology, and End Results (SEER) Program - Incidence State Restricted Access Data File (1999-2012). A reporting delay by Department of Veterans Affairs (VA) has resulted in incomplete reporting of VA hospital cases in 2011 and 2012.

Statistical Significance: A statistically significant difference indicates that there is statistical evidence that there is a difference that is unlikely to have occurred by chance alone.

Trend: Refers to the general direction in which something under measurement moves over time.

Suggested Citation: Vermont Department of Health, Burlington, VT, 2015.

**Acknowledgment:** This publication was supported by Grant/Cooperative Agreement Number U58/DP003911 from the Centers for Disease Control and Prevention. Its contents are solely the responsibility of the authors and do not necessarily represent the official views of the Centers for Disease Control and Prevention.